(B) **Hospitals/Institutions run on the approved pattern of sharing of funds with State Governments**

1. National Institute of Mental Health and Neuro Sciences, Bangalore.
2. CNCI, Kolkata.
3. Mahatma Gandhi Institute of Medical Sciences, Wardha, and
4. G.K. Hospital, Bhuj, Gujarat.

Establishing multi-speciality hospitals

241. SHRI JANARDHANAPOOJARY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government propose to establish major national level multi-speciality hospitals of the type of AIIMS, New Delhi, in various parts of the country;

(b) if so, the details in this regard, with proposed location, financial allocation, present status of each of the project and the targeted date for their completion;

(c) the criteria adopted for deciding on the location of the project;

(d) whether it is a fact that aspects like need and regional balance have not been taken into account while deciding on the location; and

(e) if so, how this anomaly is proposed to be corrected?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKALAKSHMI): (a) and (b) Yes, Sir. Under Pradhan Mantri Swasthya Suraksha Yojana (PMSSY), it is proposed to set up one AlIMS-type institution each in the States of Bihar (Patna), Chhattisgarh (Raipur), Madhya Pradesh (Bhopal), Orissa (Bhubaneshwar), Rajasthan (Jodhpur) and Uttaranchal (Rishikesh). The proposal has been considered by the Expenditure Finance Committee on 24-11-2004 and will now be placed before the competent authority for approval. Pending these clearances, start-up activities like construction of boundary wall, the process for selection of Project Consultant for providing comprehensive consultancy services and selection of

architectural concepts/designs for AIIMS like institution have been taken up. During 2004-05 a sum of Rs. 60 crores has been provided. The hospitals are expected operational after three years from the date of commencement of construction.

(c) to (e) These States have been chosen as they are under served in terms of social and health indicators such as high incidence or mortality and morbidity, inadequate facilities for superspeciality services etc.

Compilation of HIV data

242. DR. ALLADI P. RAJKUMAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether official data of HIV infected people in India are being doubted by Geneva based global fund to fight AIDS;

(b) the action proposed to compile HIV data by an independent body; and

(c) the efforts proposed to step up the programme to fight the disease?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) Yes, Sir. Various outside agencies working on HIV/AIDS, used to give a misleading picture of HIV epidemic in India by quoting un-realistic figures of HIV infections. The Executive Director of Global Fund on AIDS, TB and malaria during his recent list to India, has also quoted very high projections of HIV estimates in the country.

National AIDS Control Organization is the only organization in this country, which collects data from the field, through sentinel sites on a yearly bads. This data is being used for estimating HIV infections in the country. One such round was conducted during August to October, 2003 in 455 sites all over the country. This data indicates that the estimated number of HIV infections in the country is 51 lakh infections. These estimates have been endorsed by WHO, UNAIDS and ICMR. During the year 2004, the annual round was conducted in 670 sites and this data is being analysed.

(c) In order to prevent and control the spread of HIV/AIDS in India, Government of India has launched a comprehensive National AIDS